

Commercial Permits Motor Vehicle Division 14370 W Van Buren St Goodyear AZ 85338-3001 **Division** Phone 623-932-2247 Fax 623-932-2441

OVERSIZE/OVERWEIGHT PERMIT APPLICATION

• Print or type

- Must be legible, complete and correct
 If not applicable, enter "NA"

You must have a current registration and IFTA credential to purchase the permit. You must also provide a 504 tax clearance, if or a hill of lading, if for a new mobile hom

the request is for				_	n for a new m	oblie nome.				
IFTA	IRP Listi		Permit T			Cinale T	:- - 20) Day	- Ammusl	
☐ Yes ☐ No Permit Effective D	☐ Yes	Company	☐ Over	size	☐ Overweight	☐ Single Tr	ip 🗆 30) Day	☐ Annual	
remit Effective D	ale	Company	Ivaille							
Contact Person Na	me (first, mid	l dle, last, suf	fix)		Title					
Contact Person E-I	Mail			Pho	one					
				()					
Axles (total)	GVW (total v	veight)								
Route (list state ar	nd federal high	ways only)	- Not require	ed for 30	Day or Annual (permit.				
Unit Number		State	Make			I Pody Cty	Body Style			
Jnit Number Tractor Plate			State	IVIARE			Body Sty	Style		Year
Load Description										
Mobile Home Seria	al Number (cor	nnlete)								
Wobile Home Sens	ii Nullibei (coi	iipiete/								
Traveling From					Traveling	То				
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D	1 //1 1//				L					
Do not use the v	vord "legal"									
Length (overall) Width (overall) Width (overall)					_	Height (ove	Height (overall)			
ft		f		in		ft in				
Front Overhang (be	_	ımper) F	tear Overnar f		nd rear of trailer)					
Trailer Plate Numb	in er l.lee	p Plate Num			in Plate Number					
Trailer Frace Trailing		p			iato italiiso.					
Vehicle Configurat	ion If reque:	sting an ov	erweiaht p	ermit or	tow-away loa	d, vou must co	mplete this	s section.		
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				-	ed Must Be Ad					
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Axle Spacing:										
			 -					-		
Axle Weight:										
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Axle Width:										
Tires Per Axle:		-								
Tiro Width										
Tire Width:										
Unladen Trailer 10	Feet or Loss	- Continuou	e Traval	F7 Pov	Account Number	ar 1				
☐ Yes ☐ No	I GET OF FESS	Continuou	o iiavti	LZ Fay	Account Number	×1				
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